# 2007 Continuum of Care Application: Exhibit 1

## Part I: CoC Organizational Structure

| HUD-Defined CoC Name:* | CoC Number* |
|---|---|
| Montana Statewide CoC | MT-500 |

## A: CoC Lead Organization Chart

| | | |
|---|---|---|
| CoC Lead Organization:  Montana Continuum of Care Coalition | | |
| CoC Contact Person:  Robert Buzzas | | |
| Contact Person's Organization Name:  Montana Continuum of Care Coalition | | |
| Street Address:  321 E. Main, Suite 316 | | |
| City:  Bozeman | State: MT | Zip: 59715-4721 |
| Phone Number:  406-586-1572 | Fax Number:  406-522-8232 | |
| Email Address:  civicconsulting@msn.com | | |

## B: CoC Geography Chart

All of the county and city geographic codes are claimed and listed below and grouped by districts:

| DISTRICT 1,2 & 3 | | DISTRICT 7 | |
|---|---|---|---|
| Carter County | 309011 | Billings | 300066 |
| Custer County | 309017 | Big Horn County | 309003 |
| Daniels County | 309019 | Carbon County | 309009 |
| Dawson County | 309021 | Yellowstone County | 309111 |
| Fallon County | 309025 | Stillwater County | 309095 |
| Garfield County | 309033 | Sweet Grass County | 309097 |
| McCone County | 309055 | | |
| Phillips County | 309071 | DISTRICT 8 | |
| Powder River County | 309075 | Broadwater County | 309007 |
| Prairie County | 309079 | Lewis and Clark County | 309049 |
| Richland County | 309083 | Jefferson County | 309043 |
| Roosevelt County | 309085 | | |
| Rosebud County | 309087 | DISTRICT 9 | |
| Sheridan County | 309091 | Gallatin County | 309031 |
| Treasure County | 309103 | Meagher County | 309059 |
| Valley County | 309105 | Park County | 309067 |
| Wibaux County | 309109 | | |
| | | DISTRICT 10 | |
| DISTRICT 4 | | Flathead County | 309029 |
| Blaine County | 309005 | Lake County | 309047 |
| Chouteau County | 309015 | Lincoln County | 309053 |
| Hill County | 309041 | Sanders County | 309089 |
| Liberty County | 309051 | | |

| DISTRICT 5 | | | DISTRICT 11 | |
|---|---|---|---|---|
| Great Falls | 300342 | | Missoula | 300540 |
| Cascade County | 309013 | | Mineral County | 309061 |
| Glacier County | 309035 | | Missoula County | 309063 |
| Pondera County | 309073 | | Ravalli County | 309081 |
| Teton County | 309099 | | | |
| Toole County | 309101 | | DISTRICT 12 | |
| | | | Beaverhead County | 309001 |
| DISTRICT 6 | | | Deer Lodge County | 309023 |
| Fergus County | 309027 | | Granite County | 309039 |
| Golden Valley County | 309037 | | Madison County | 309057 |
| Judith Basin County | 309045 | | Powell County | 309077 |
| Musselshell County | 309065 | | Silver Bow County | 309093 |
| Petroleum County | 309069 | | | |
| Wheatland County | 309107 | | | |

# CoC Structure and Decision-Making Processes

## C: CoC Groups and Meetings Chart

| | | Meeting Frequency (check only one column) | | | | |
|---|---|---|---|---|---|---|
| | | st M | st Qu | st Bi | ual | |
| **CoC Primary Decision-Making Group** (list only one group) | | | | | | |
| **Name:** | Board of Directors | | | X | | **15** |
| **Role:** | The board includes representatives from each of the state's ten planning districts, plus five at-large members. It is responsible for overseeing the organizational development, policies and procedures of the Coalition, but most decisions continue to be referred to the entire membership. | | | | | **Enter the number of organizations/ entities that are members of each CoC planning group listed on this chart.** |
| **Other CoC Committees, Sub-Committees, Workgroups, etc.** | | | | | | |
| **Name:** | CoC Application Process Committee | | | X | | |
| **Role:** | This committee annually reviews the application procedures each year and recommends changes to either the Board of Directors or to the Coalition membership for adoption. In virtually all instances, final decisions are made by the Coalition Members. | | | | | |
| **Name:** | Renewal Review Committee | | | | X | **5** |
| **Role:** | The committee reviews all renewal projects for timely implementation, consistency in proposal and performance, progress toward outcomes and for any warning signs in the areas of management and service delivery. | | | | | |
| **Name:** | Data Development & Management Committee | | | | X | **5** |
| **Role:** | The committee reviews and assesses HMIS implementation as well as overall use of data in assessing needs, prioritizing projects, public education and influencing local and state public policy. | | | | | |

CoC Planning Groups

# D: CoC Planning Process Organizations Chart

| | Specific Names of All CoC Organizations | Geographic Area Represented | Subpopulations Represented, if any* (no more than 2) | |
|---|---|---|---|---|
| **PUBLIC SECTOR** | **STATE GOVERNMENT AGENCIES** | | | |
| | MT Department of Health and Human Services (DPHHS), Intergovernmental Human Services Bureau | STATEWIDE-59 GEOCODES | HIV | |
| | DPHHS, Addictive and Mental Disorders Div. | STATEWIDE -59 GEOCODES | SMI | SA |
| | DPHHS, Family Services Division | STATEWIDE-59 GEOCODES | | |
| | DPHHS, State Hospital | STATEWIDE-59 GEOCODES | SMI | SA |
| | MT Office of Public Instruction | STATEWIDE-59 GEOCODES | Y | |
| | MT Dept of Commerce (Consolidated Plan Officer) | STATEWIDE-59 GEOCODES | | |
| | MT Dept of Commerce, Housing Division | STATEWIDE-59 GEOCODES | HIV | |
| | **LOCAL GOVERNMENT AGENCIES** | | | |
| | City of Billings, Community Dev. Div | 300066 | | |
| | Missoula City County Planning & Grants | 309063 | | |
| | **PUBLIC HOUSING AGENCIES** | | | |
| | Missoula Public Housing Authority | 309063 | SMI | SA |
| | Helena Public Housing Authority | 309049 | SMI | SA |
| | Butte Public Housing Authority | 309093 | SMI | SA |
| | Billings Public Housing Authority | 309111 | SMI | SA |
| | **SCHOOL SYSTEMS / UNIVERSITIES** | | | |
| | Montana State University/HOPWA Program | STATEWIDE-59 GEOCODES | HIV | |
| | **LAW ENFORCEMENT / CORRECTIONS** | | | |
| | Montana Department of Corrections | STATEWIDE-59 GEOCODES | | |
| | Montana State Prison | STATEWIDE-59 GEOCODES | | |
| | Board of Crime Control | STATEWIDE-59 GEOCODES | | |
| | **LOCAL WORKFORCE INVESTMENT ACT (WIA) BOARDS** | | | |
| | | | | |
| | **OTHER** | | | |
| | Social Security Administration | STATEWIDE-59 GEOCODES | | |
| **PRIVATE SECTOR** | **NON-PROFIT ORGANIZATIONS** | | | |
| | MT Veterans Foundation | STATEWIDE-59 GEOCODES | Vet | |
| | Florence Crittenton Home | STATEWIDE-59 GEOCODES | SA | Y |
| | Rocky Mountain Development Council | 309049, 309007, 309043 | | |

| | Specific Names of All CoC Organizations | Geographic Area Represented | Subpopulations Represented, if any* (no more than 2) | |
|---|---|---|---|---|
| | Missoula AIDS Council | DISTRICTS 5,8,9,10,11, & 12. 26 GEOCODES | HIV | |
| | Share House | STATEWIDE-59 GEOCODES | SA | |
| | NW Human Resources | 309029, 309047, 309053, 309098 | | |
| | Samaritan House | 309029, 309047, 309053, 309089 | | |
| | Golden Triangle Mental Health Center | DISTRICTS 4,5,6, 8. 19 GEOCODES | SMI | SA |
| | Western MT Mental Health Center | DISTRICTS 9,10,11,12 17 GEOCODES | SMI | SA |
| | South Central MT Regional Mental Health Center | DISTRICTS 1,2,3,7 23 GEOCODES | SMI | SA |
| | Homeward Bound | STATEWIDE-59 GEOCODES | | |
| | Yellowstone AIDS Project | DISTRICTS 1,2,3,4,5,6,7 39 GEOCODES | HIV | |
| | District 7 HRDC | 300066, 309003, 309009, 30911, 309095, 309097 | | |
| | Tumbleweed Runaway Program | STATEWIDE-59 GEOCODES | | |
| | Opportunities Inc. | 300342, 309013, 309035, 309073, 309099, 309101 | | |
| | Poverello Inc. | 309063 | | |
| | AWARE, Inc. | STATEWIDE-59 GEOCODES | | |
| | Turning Point Addictive Services | STATEWIDE-59 GEOCODES | SA | |
| | Mountain Home | STATEWIDE-59 GEOCODES | | |
| | Sanders County Coalition for Families | 309089 | DV | |
| | District IV HRDC | 309005, 309015, 309041, 309051 | | |
| | S.A.F.E. | 309081 | DV | |
| | District 6 HRDC | 309027, 309037, 309045, 309065, 309069, 309107 | | |
| | Action for Eastern Montana | 309011, 309017, 309019, 309021, 309025, 309033, 309055, 309071, 309075, 309079, 309083, 309085, 309091, 309103, 309105, 309109 | | |
| | FAITH-BASED ORGANIZATIONS | | | |
| | Interfaith Hospitality Network | 309111 | | |
| | Family Promise | 309031 | | |
| | God's Love | 309049 | | |

| | Specific Names of All CoC Organizations | Geographic Area Represented | Subpopulations Represented, if any* (no more than 2) | |
|---|---|---|---|---|
| | Salvation Army | 309063 | | |
| | Great Falls Rescue Mission | 309013 | | |
| | YWCA | 300540, 309063, 309111, 300066 | DV | |
| | **FUNDERS / ADVOCACY GROUPS** | | | |
| | | | | |
| | **BUSINESSES (BANKS, DEVELOPERS, BUSINESS ASSOCIATIONS, ETC.)** | | | |
| | | | | |
| | **HOSPITALS / MEDICAL REPRESENTATIVES** | | | |
| | Gallatin Community Clinic | 309031 | | |
| | Deering Clinic | 300066, 309003, 309009, 309111, 309095, 309097 | | |
| | Montana Veteran Admin Health Care System | STATEWIDE-59 GEOCODES | VET | |
| | Healthcare for the Homeless | STATEWIDE-59 GEOCODES | | |
| | **HOMELESS PERSONS** | | | |
| | Rick Salyer | 309049 | VET | |
| | Gloria Koffler | 309049 | | |
| | **OTHER** | | | |

## E: CoC Governing Structure Chart

1. Is the CoC's primary decision-making body a legally recognized organization (check one)?

☐ Yes, a 501(c)(3)
☐ Yes, a 501(c)(4)
☐ Yes, other – specify: _____
☒ No, not legally recognized

2. If your CoC were provided with additional administrative funds from HUD, would the primary decision-making body, or an agent designated by it (e.g. a city or non-profit organization), be able to be responsible for activities such as applying for HUD funding and serving as the grantee, providing project oversight, and monitoring? Explain.

Yes. We are in the process of deciding whether the Coalition will become a 501(c)(3) or whether the State of Montana, Department of Health and Human Services (DPHHS) will be the recipient. DPHHS is currently and unofficially suggesting that the Coalition become a nonprofit and receive any funding directly. Either way, responsibilities for receiving grant funds, conducting oversight and monitoring is being planned now for future contingencies.

3. What percentage of the decision-making body membership represents the private sector, including non-profit providers, homeless or formerly homeless persons, advocates and consumer interests, etc.?    __73__%

4a.  Indicate how the **members** of the primary decision-making body are selected (check all that apply):

☒ Elected          ☒ ~~Assigned~~/Volunteer
☐ Appointed        ☐ Other – specify: _____

4b.  Briefly explain the selection process.  (For example, if 5 members are appointed and 6 are elected, explain why this process was established and describe how it works.).

Fourteen members are elected at the annual Fall Planning Meeting by the Qualified Members of the Coalition.  A nominating committee puts forth a slate of names and additional nominations are taken from the floor.  One seat is reserved for the MT Dept of Health and Human Services (which provides staffing through a contract for services) which appoints a representative.

5.  Indicate how the **leaders** of the primary decision-making body are selected (check all that apply):

☒ Elected          ☒ ~~Assigned~~/Volunteer
☐ Appointed        ☐ Other – specify: _____

## F: CoC Project Review and Selection Chart

| 1. Open Solicitation | | | |
|---|---|---|---|
| a.  Newspapers | ☐ | d.  Outreach to Faith-Based Groups | ☐ |
| b.  Letters/Emails to CoC Membership | ☒ | e.  Announcements at CoC Meetings | ☒ |
| c.  Responsive to Public Inquiries | ☒ | f.  Announcements at Other Meetings | ☒ |
| **2. Objective Rating Measures and Performance Assessment** | | | |
| a.  CoC Rating & Review Committee Exists | ☒ | j.  Assess Spending (fast or slow) | ☒ |
| b.  Review CoC Monitoring Findings | ☒ | k.  Assess Cost Effectiveness | ☒ |
| c.  Review HUD Monitoring Findings | ☒ | l.  Assess Provider Organization Experience | ☒ |
| d.  Review Independent Audit | ☐ | m. Assess Provider Organization Capacity | ☒ |
| e.  Review HUD APR for Performance Results | ☒ | n.  Evaluate Project Presentation | ☒ |
| f.  Review Unexecuted Grants | ☒ | n.  Review CoC Membership Involvement | ☒ |
| g.  Site Visit(s) | ☒ | o.  Review Match | ☒ |
| h.  Survey Clients | ☐ | p.  Review All Leveraging Letters (to ensure that they meet HUD requirements) | ☐ |
| i.  Evaluate Project Readiness | ☒ | | |
| **3. Voting/Decision System** | | | |
| a.  Unbiased Panel / Review Committee | ☒ | d.  One Vote per Organization | ☒ |
| b.  Consumer Representative Has a Vote | ☒ | e.  Consensus (general agreement) | ☒ |
| c.  All CoC Members Present Can Vote | ☒ | f.  Voting Members Abstain if Conflict of Interest | ☒ |

## G: CoC Written Complaints Chart

| Were there any written complaints received by the CoC regarding any CoC matter in the last 12 months? | ☐ Yes<br>☒ No |
|---|---|

# Part II: CoC Housing and Service Needs

## H: CoC Services Inventory Chart

| (1) | (2) Prevention | | | | | (3) Outreach | | | (4) Supportive Services | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Provider Organizations** | Mortgage Assistance | Rental Assistance | Utilities Assistance | Counseling/Advocacy | Legal Assistance | Street Outreach | Mobile Clinic | Law Enforcement | Case Management | Life Skills | Alcohol & Drug Abuse | Mental Heath Counseling | Healthcare | HIV/AIDS | Education | Employment | Child Care | Transportation |
| Statewide: | | | | | | | | | | | | | | | | | | |
| HOME Program | X | | | | | | | | | | | | | | | | | |
| HOPWA | | X | | | | | | | | | | | | | | | | |
| Section 8 Housing Program | | X | | | | | | | | | | | | | | | | |
| Housing Choice Self Sufficiency | X | X | | | | | | | | | | | | | | | | |
| Self-Help Homeownership Program (SHOP) | X | | | | | | | | | | | | | | | | | |
| Treasure State Endowment Program | X | | | | | | | | | | | | | | | | | |
| MT Board of Investments Housing Programs | X | | | | | | | | | | | | | | | | | |
| Energy Share | | | X | | | | | | | | | | | | | | | |
| LIHEAP | | | X | | | | | | | | | | | | | | | |
| Emergency Shelter Block Grant | | | X | | | | | | | | | | | | | | | |
| WIA Program | | | | | | | | | | | | | | | | X | | |
| Montana Legal Services | | | | | X | | | | | | | | | | | | | |
| PATH case managers | | | | | | X | | | x | | | | | | | | | |
| Healthcare for the Homeless | | | | | | X | | | | | | | X | | | | | |
| Share House (Missoula) | | | | | | | | | | | X | | | | | | | |
| Western MT Mental Health (Butte) | | | | | | | | | | | X | | | | | | | |
| DoL Employment & Training Program | | | | | | | | | | | | | | | | X | | |

Because this application is for a <u>statewide</u> continuum of care and a full listing of services would be very long, a representative sampling of services for districts <u>where renewal applications are being submitted</u> is provided below.  This is consistent with all applications submitted since 1999.

| | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **District 7** | | | | | | | | | | | | | | | | | | |
| Health Dept. | | | | | | | | | | | | | X | | | | | |
| Job Service | | | | | | | | | | | | | | | | X | | |
| Mental Health Center | | | | | | X | | | X | | | | | | | | | |
| Vocational Rehab | | | | | | | | | | | | | | | | X | | |
| Healthcare Homeless | | | | | | X | | | | | | | X | | | | | |
| Tumbleweed | | | | X | | | | | | | | | | | | | | |
| HRDC | | X | | | | | | | X | | | | | | X | | X | |
| Deering Clinic | | | | | | X | | | | | | | X | | | | | |
| Vocational Rehab | | | | | | | | | | | | | | | | X | | |
| Mental Health Center | | | | X | | | | | | | | | | | | | | |
| Adult Education Center | | | | | | | | | | | | | | | X | | | |
| Alternatives | | | | | | | | | | | X | | | | | | | |
| Career Guidance | | | | | | | | | | X | | | | | | | | |
| Family Tree Center | | | | | | | | | | X | | | | | | | | |
| Friendship House | | | | | | | | | | | | | | | X | | | |
| Indian Health Board | | | | | | | | | | | | | X | | | | | |
| Job Connection | | | | | | | | | | | | | | | | X | | |
| Montana Legal Service | | | | | X | | | | | | | | | | | | | |
| YWCA | | | | | | | | | | | | | | | X | X | | |
| **District 8** | | | | | | | | | | | | | | | | | | |
| Boyd Andrew Chemical Dependency | | | | X | | | | | | | | | | | | | | |
| Career-Training Institute | | | | | | | | | | | | | | | | X | | |
| County Cooperative Health-Dental | | | | | | | | | | | X | | X | | | | | |
| County Health Department | | | | | | | | | | | X | | | | | | | |
| Dental Services | | | | | | | | | | | | | X | | | | | |
| God's Love, Inc. | | X | | | | | | | | | | | | | | | | |
| Golden Triangle | | | | X | | | | | | | | | | | | | | |
| Good Samaritan | | X | | | | | | | | | | | | | | | | |
| Helena Indian Alliance | | | | | | | | | | | X | | | | | | | |
| Leo Pocha- Dental | | | | | | | | | | | | | X | | | | | |
| Leo Pocha- Medical | | | | | | | | | | | | | X | | | | | |
| MCDC | | | | | | | | | | | X | | | | | | | |
| Vocational Rehabilitation | | | | | | | | | | | | | | | | X | | |
| **District 10** | | | | | | | | | | | | | | | | | | |
| Educ. Opp. Center | | | | | | | | | | X | | | | | | | | |
| Violence Free/Abbie | | | | X | | | | | | | | | | | | | | |
| FV Comm. College | | | | | | | | | | | | | | | X | | | |

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Eagle Transit | | | | | | | | | | | | | | | | | X |
| Flathead Co. Health Dept. | | | | | | | | | | | | X | | | | | |
| Lamplighter Adult Mental Health | | | | | | | | | | X | | | | | | | |
| Vocational Rehabilitation | | | | | | | | X | | | | | | X | | | |
| Hope Pregnancy Center | | | X | | | | | | | | X | | | | | | |
| Salvation Army | | | | | | | | | | | X | | | | | | |
| Flathead Valley CDC | | | | | | | | | X | | | | | | | | |
| Working Innovations | | | | | | | | | | | | | | X | | | |
| SCCFF | | | | X | | | | X | | | | | | | | | |
| SCCFF/TH grant | | | X | | | | X | X | | | | | | | X | | |
| Leta Livoti, Ph.D. | | | X | | | | | | | | | | | | | | |
| Mental Health Center | | | | | | | | | | X | | | | | | | |
| Extension Office | | | | | | | | X | | | | | | | | | |
| MT. Consumer Credit | | | | | | | | X | | | | | | | | | |
| MT Job Service | | | | | | | | X | | | | | | X | | | |
| NMHR- RHY | | | | | | | X | X | | | | | | | | | |
| NMHR- ES Grant | | | | | | | X | X | | | | | | | | | |
| **District 11** | | | | | | | | | | | | | | | | | |
| WORD | | | | | | | | X | | | | | | | | | |
| Parenting Place | | | | | | | | X | | | | | | | | | |
| EFNEP | | | | | | | | X | | | | | | | | | |
| Missoula Federal Credit Union | | | | | | | | X | | | | | | | | | |
| Westerm Montana Emergency Physicians- St. Patrick Hospital | | | | | | | | | | | X | | | | | | |
| Montana Chemical Dependency Center | | | | | | | | | X | | | | | | | | |
| Turning Point Addiction Services | | | | | | | | | X | | | | | | | | |
| Missoula Vocational Rehabilitation | | | | | | | | | | | | | | X | | | |
| Montana Legal Services Association | | | | X | | | | | | | | | | | | | |
| Partnership Health Center | | | | | | | | | | | X | | | | | | |
| Natural Creations Salsa | | | | | | | | X | | | | | | | | | |
| Missoula City-County Health Department | | | | | | | | | | | X | | | | | | |
| YWCA | | | X | | | | | X | | | | | X | | X | | |
| Futures | | | | | | | | X | | | | | | | | | |
| Even Start | | | | | | | | | | | | | X | | | | |
| Parents As Teachers | | | | | | | | X | | | | | | | | | |
| Early Head Start | | | | | | | | | | | | | X | | X | | |
| Office of Public Assistance | | | | | | | | | | | X | | | | | | |

| Organization | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ravalli Head Start | | | | | | | | | | | | | | X | | X |
| Riverfront Counseling | | | | | | | | X | | | | | | | | |
| Community Members | | | | | | X | | | | | | | | | | |
| Salvation Army | X | | | X | | X | | | | | | | | | | |
| Women's Opportunity and Resource Development | X | X | | | | X | | | | | | | | | | |
| Western Montana Addiction Services | | | | | | | X | | | | | | | | | |
| Missoula Job Service WoRC Program | | | | | | | | | | | | | | | X | |
| Western Montana Mental Health Center | | | | X | | X | | X | | | | | | | | |
| Missoula Workforce Center | | | | | | | | | | | | | | | X | |
| Vocational Rehabilitation Services | | | | | | | | | | | | | | | X | |
| Child Care Resources | | | | | | | | | | | | | | | | X |
| Human Resource Council | X | | | | | | | | | | | | | | | |
| Missoula Housing Authority | X | | | | | | | | | | | | | | | |
| **District 12** | | | | | | | | | | | | | | | | |
| Literacy Volunteers of America | | | | | | | | | | | | | | X | | |
| Community Health Center | | | | | | | | | | | X | | | | | |
| Butte/Silver Bow Chemical Dependency Services | | | | | | | X | | | | | | | | | |
| Western Montana Mental Health Center | | | | | | | | X | | | | | | | | |
| MSU Nutrition Program | | | | | | X | | | | | | | | | | |
| Career Futures (WoRC Program) | | | | | | | | | | | | | | | X | |
| Montana Chemical Dependency Center | | | | | | X | | | | | | | | | | |

# CoC Housing Inventory and Unmet Needs

## I: CoC Housing Inventory Charts

This section includes three housing inventory charts—for emergency shelter, transitional housing, and permanent housing.  Note that the information in these charts should reflect a point-in-time count.  For the Permanent Housing Inventory Chart, the beds listed under "new inventory" should indicate beds that became available for occupancy for the first time between February 1, 2006 and January 31, 2007.  For complete instructions in filling out this section, see the Instructions section at the beginning of the application.

## I: CoC Housing Inventory Charts

**Emergency Shelter: Fundamental Components in CoC System – Housing Inventory Chart**

| Provider Name | Facility Name | HMIS Part. Code | Number of Year-Round Beds in HMIS | | Geo Code ☐ | Target Pop | | Year-Round | | | Total Year-Round Beds | Other Beds | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Ind. | Fam. | | A | B | Fam. Units | Fam. Beds | Indiv. Beds | | Seas-onal | Overflow & Voucher |
| **Current Inventory** | | | | | | | | | | | | | |
| District 1, 2, 3 New Life Mission, Inc. | New Life Mission | D | 0 | 0 | 309021 | M | | 0 | 0 | 14 | 14 | 0 | 0 |
| District 4 HRDC | The Haven | DV | 0 | 0 | 309041 | M | DV | 1 | 12 | 6 | 18 | 0 | 0 |
| Distric 4 HRDC | McLaughlin House | DV | 0 | 0 | 309041 | M | DV | 2 | 10 | 4 | 14 | 0 | 0 |
| District 5 Great Falls Rescue Mission | Men's Shelter | D | 0 | 0 | 309013 | SM | | 0 | 0 | 26 | 26 | 0 | 4 |
| District 5 Great Falls Rescue Mission | Women & Family Shelter | D | 0 | 0 | 309013 | M | | 4 | 16 | 20 | 36 | 0 | 4 |
| District 5 YWCA | Mercy Home | DV | 0 | 0 | 309013 | M | DV | 1 | 25 | 0 | 25 | 0 | 0 |
| District 6 HRDC | Central MT Ministerial Association | D | 0 | 0 | 309027 | SMF | | 0 | 0 | 1 | 1 | 0 | 0 |
| District 6 Salvation Army | Calvert Hotel | D | 0 | 0 | 309027 | SMF | | 0 | 0 | 10 | 10 | 0 | 0 |
| District 7 MT Rescue Mission | MT Rescue Mission | PS | 17 | 0 | 309111 | SMF | | 0 | 0 | 74 | 74 | 0 | 0 |
| District 7 MT Rescue Mission | Women & Family Shelter | D | 0 | 0 | 309111 | M | | 35 | 73 | 17 | 90 | 0 | 0 |
| District 7 YWCA | Gateway House | DV | 0 | 0 | 300066 | M | DV | 1 | 6 | 13 | 19 | 0 | 3 |
| District 7 Tumbleweed | Tumbleweed Runaway & Homeless Youth | D | 0 | 0 | 309111 | YMF | | 0 | 0 | 12 | 12 | 0 | 0 |
| District 7 MT Association of Churches | Interfaith Hospitality Network | D | 0 | 0 | 309111 | FC | | 5 | 14 | 0 | 14 | 0 | 0 |
| District 8 God's Love | God's Love Emergency Shelter | D | 0 | 0 | 309049 | SMF | | 0 | 0 | 35 | 35 | 0 | 3 |
| District 8 Montana Youth Homes | Montana Youth Group Home | D | 0 | 0 | 309049 | YM | | 0 | 0 | 11 | 11 | 0 | 0 |

| | | | Ind. | Fam. | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| District 8 Rocky Mountain Development Council | Friendship Center | DV | 0 | 0 | 309049 | FC | DV | 6 | 15 | 0 | 15 | 0 | 0 |
| District 9 Family Promise of Gallatin County | Family Promise | FC | 0 | 0 | 309031 | FC | | 1 | 14 | 0 | 14 | 0 | 0 |
| District 10 Samaritan House, Inc. | Samaritan House | PA | 15 | 25 | 309029 | M | | 5 | 15 | 28 | 43 | 0 | 0 |
| District 10 Sanders County Coalition for Families | Thompson Falls Women's Shelter | DV | 0 | 0 | 309089 | FC | DV | 1 | 8 | 0 | 8 | 0 | 2 |
| District 10 Violence Free Crisis | The Abby Shelter | DV | 0 | 0 | 309029 | M | DV | 1 | 10 | 4 | 14 | 0 | 0 |
| District 10 Safe Harbor, Inc. | Safe Harbor | DV | 0 | 0 | 309047 | M | DV | 1 | 8 | 2 | 10 | 0 | 0 |
| District 11 Poverello, Inc. | Poverello Center | N | 0 | 0 | 300540 | SMF | | 0 | 0 | 67 | 67 | 0 | 12 |
| District 11 YWCA | YWCA Domestic Violence Center | DV | 0 | 0 | 309063 | SF | DV | 0 | 0 | 25 | 25 | 0 | 0 |
| District 11 S.A.F.E. | S.A.F.E. Shelter | DV | 0 | 0 | 309081 | M | DV | 4 | 7 | 2 | 9 | 0 | 0 |
| District 12 Butte Christian Community Center | Safe Space | DV | 0 | 0 | 309093 | M | DV | 2 | 2 | 14 | 16 | 0 | 0 |
| District 12 Butte Rescue Mission | Butte Rescue Mission | D | 0 | 0 | 309093 | M | | 3 | 3 | 32 | 35 | 0 | 0 |
| | **SUBTOTALS:** | | 32 | 25 | **SUBTOT. CURRENT INVENTORY:** | | | 74 | 238 | 417 | 655 | 0 | 28 |

**New Inventory in Place in 2006**
**(Feb. 1, 2006 – Jan. 31, 2007)**

| | | | Ind. | Fam. | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| None this year | | | | | | | | 0 | 0 | 0 | 0 | 0 | 0 |
| | **SUBTOTALS:** | | | | **SUBTOTAL NEW INVENTORY:** | | | 74 | 238 | 417 | 655 | 0 | 28 |

| **Inventory Under Development** | | Anticipated Occupancy Date | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| None this year | | | | | | | | 0 | 0 | 0 | 0 | 0 | **0** |
| | **SUBTOTAL INVENTORY UNDER DEVELOPMENT:** | | | | | | | 0 | 0 | 0 | 0 | 0 | **0** |

| **Unmet Need** | | | | | **UNMET NEED TOTALS:** | | | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

| Total Year-Round Beds—Individuals | | | Total Year-Round Beds—Families | |
|---|---|---|---|---|
| 1. Total Year-Round Individual Emergency Shelter (ES) Beds: | 417 | | 6. Total Year-Round Family Emergency Shelter (ES) Beds: | 238 |
| 2. Number of DV Year-Round Individual ES Beds: | 70 | | 7. Number of DV Year-Round Family ES Beds: | 103 |
| 4.   Subtotal, non-DV Year-Round Individual ES Beds (Line 1 minus Line 2): | 347 | | 8. Subtotal, non-DV Year-Round Family ES Beds (Line 6 minus Line 7): | 135 |
| 4. Total Year-Round Individual ES Beds in HMIS: | 32 | | 9. Total Year-Round Family ES Beds in HMIS | 25 |
| 5. HMIS Coverage—Individual ES Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number): | 9 % | | 10. HMIS Coverage—Family ES Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number): | 19 % |

## Transitional Housing: Fundamental Components in CoC System – Housing Inventory Chart

| Provider Name | Facility Name | HMIS Part. Code | Number of Year-Round Beds in HMIS | | Geo Code ☐ | Target Pop | | Year-Round | | | Total Year-Round Beds |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Ind. | Fam. | | A | B | Family Units | Family Beds | Individ. Beds | |
| **Current Inventory** | | | | | | | | | | | |
| District 1, 2, 3 New Life Mission, Inc. | Matthews House | D | 0 | 0 | 309021 | FC | | 1 | 8 | 0 | 8 |
| District 1, 2, 3 Action for Eastern Montana | RHY | D | 0 | 0 | 309021 | YMF | | 0 | 0 | 3 | 3 |
| District 4 HRDC | McLaughlin Transitional Housing Project | DV | 0 | 0 | 309041 | FC | DV | 4 | 20 | 0 | 20 |
| District 4 HRDC | RHY | D | 0 | 0 | 309041 | YMF | | 0 | 0 | 3 | 3 |
| District 5 Gateway Community Services | Grace Home | D | 0 | 0 | 309013 | FC | | 1 | 2 | 0 | 2 |
| District 5 Great Falls Rescue Mission | Men' s Faith Based CD Program | D | 0 | 0 | 309013 | SM | | 0 | 0 | 21 | 21 |
| District 5 Great Falls Rescue Mission | Womens Faith Based CD Program | D | 0 | 0 | 309013 | M | | 3 | 9 | 0 | 9 |
| District 5 Opportunities, Inc. | RHY | D | 0 | 0 | 309013 | YMF | | 0 | 0 | 3 | 3 |
| District 6 Emanual Baptist Church | Gilead House | D | 0 | 0 | 309027 | M | | 0 | 0 | 1 | 1 |
| District 6 HRDC | RHY | D | 0 | 0 | 309027 | YMF | | 0 | 0 | 3 | 3 |

| District / Agency | Program | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| District 7 MT Rescue Mission | MT Rescue Mission | D | 0 | 0 | 309111 | SM | | 0 | 0 | 23 | 23 |
| District 7 MT Rescue Mission | Women & Family Shelter | D | 0 | 0 | 309111 | M | | 1 | 12 | 8 | 20 |
| District 7 YWCA | Gateway House | DV | 0 | 0 | 309111 | M | DV | 1 | 6 | 13 | 9 |
| District 7 HRDC | RHY | D | 0 | 0 | 309111 | YMF | | 0 | 0 | 3 | 3 |
| District 8 God's Love, Inc. | God's Love Family Transitional Housing Center  * | PS | 0 | 13 | 309049 | M | | 9 | 42 | 3 | 45 |
| District 8 Rocky Mountain Development Council | Friendship Center | DV | 0 | 0 | 309049 | FC | DV | 1 | 7 | 0 | 7 |
| District 8 Montana Youth Homes | Montana Youth Homes | D | 0 | 0 | 309049 | YMF | | 0 | 0 | 8 | 8 |
| District 8 Boyd Andrews | Boyd Andrews House | D | 0 | 0 | 309049 | SM | | 0 | 0 | 1 | 1 |
| District 8 Florence Crittenton | Montana Florence Crittenton Home  * | PA | 0 | 8 | 309049 | M | | 2 | 4 | 4 | 8 |
| District 8 Golden Triangle Community Mental Health Center | Hannaford House | D | 0 | 0 | 309049 | SMF | | 0 | 0 | 1 | 1 |
| District 8 Montana Veteran's Foundation | Willis Cruse Home for Veterans | D | 0 | 0 | 309049 | SM | VET | 0 | 0 | 7 | 7 |
| District 8 Rocky Mountain Development Council | RHY | D | 0 | 0 | 309049 | YMF | | 0 | 0 | 3 | 3 |
| District 9 The Network | The Network | DV | 0 | 0 | 309031 | M | DV | 3 | 24 | 0 | 24 |
| District 9 HRDC | Carriage House | D | 0 | 0 | 309031 | FC | | 2 | 4 | 0 | 4 |
| District 9 HRDC | RHY | D | 0 | 0 | 309031 | YMF | | 0 | 0 | 3 | 3 |
| District 10 NW Montana Human Resources | Courtyard Apartments  * | N | 0 | 0 | 309029 | M | | 16 | 26 | 8 | 34 |
| District 10 Samaritan House | Samaritan House  * | PS | 6 | 5 | 309029 | M | | 1 | 6 | 14 | 20 |
| District 10 Sanders County Coalition for Families | Lavonne Kennedy THP | DV | 0 | 0 | 309029 | M | DV | 5 | 15 | 0 | 15 |

| | | | Ind. | Fam. | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| District 10 NW Human Resources | RHY | D | 0 | 0 | 309029 | YMF | | 0 | 0 | 3 | 3 |
| District 11 Poverello, Inc. | Joseph Residence  * | N | 0 | 0 | 309063 | FC | | 7 | 56 | 0 | 56 |
| District 11 Missoula Housing Authority/Poverello, Inc. | Valor House | N | 0 | 0 | 309063 | SMF | VET | 0 | 0 | 17 | 17 |
| District 11 Salvation Army | Gateway Center  * | PA | 14 | 0 | 309063 | FC | | 7 | 14 | 0 | 14 |
| District 11 YWCA | YWCA-Ada Transitional Housing  * | DV | 0 | 0 | 309063 | FC | DV | 23 | 57 | 0 | 57 |
| District 11 Mountain Home, Inc. | Mountain Home  * | PA | 0 | 8 | 309063 | M | | 4 | 8 | 0 | 8 |
| District 11 Turning Point | Share House  * | N | 0 | 0 | 309063 | SMF | | 0 | 0 | 8 | 8 |
| District 11 MT Rescue Mission | Missoula 3:16 | D | 0 | 0 | 309063 | SM | | 0 | 0 | 6 | 6 |
| District 11 S.A.F.E. | S.A.F.E. Transitional Housing  * | DV | 0 | 0 | 309081 | M | DV | 9 | 19 | 1 | 20 |
| District 11 Turning Point | Carole Graham Home | DV | 0 | 0 | 309063 | FC | DV | 2 | 3 | | 3 |
| District 11 HRDC | RHY | D | 0 | 0 | 309063 | YMF | | 0 | 0 | 3 | 3 |
| District 12 HRDC | RHY | D | 0 | 0 | 309063 | YMF | | 0 | 0 | 3 | 3 |
| District 12 HRDC | Homeward Bound  * | PS | 3 | 14 | 309063 | M | | 4 | 6 | 24 | 30 |
| District 12 Discovery House | District 12 Discovery House | D | 0 | 0 | | YMF | | 0 | 0 | 9 | 9 |
| | | **SUBTOTALS:** | 23 | 48 | **SUBTOT. CURRENT INVENTORY:** | | | 106 | 348 | 207 | 545 |

**New Inventory in Place in 2006**
**(Feb. 1, 2006 – Jan. 31, 2007)**

| | | | Ind. | Fam. | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| NONE THIS YEAR | | | 0 | 0 | | | | 0 | 0 | 0 | 0 |
| | | **SUBTOTALS:** | | | **SUBTOTAL NEW INVENTORY:** | | | 0 | 0 | 0 | 0 |

| Inventory Under Development | | Anticipated Occupancy Date | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| None this year | | | | | | 0 | 0 | 0 | **0** |
| | | | | **SUBTOTAL INVENTORY UNDER DEVELOPMENT:** | | 0 | 0 | 0 | 0 |
| **Unmet Need** | | | | **Unmet Need Totals:** | | **33** | **21** | **0** | **21** |

| Total Year-Round Beds—Individuals | | Total Year-Round Beds—Families | |
|---|---|---|---|
| 1. Total Year-Round Individual Transitional Housing Beds: | 207 | 6. Total Year-Round Family Transitional Housing Beds: | 348 |
| 2. Number of DV Year-Round Individual TH Beds: | 14 | 7. Number of DV Year-Round Family TH Beds: | 151 |
| 3. Subtotal, non-DV Year-Round Individual TH Beds (Line 1 minus Line 2): | 193 | 8. Subtotal, non-DV Year-Round Family TH Beds (Line 6 minus Line 7): | 197 |
| 4. Total Year-Round Individual TH Beds in HMIS: | 23 | 9. Total Year-Round Family TH Beds in HMIS | 48 |
| 5. HMIS Coverage—Individual TH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number): | 12 % | 10. HMIS Coverage—Family TH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number): | 24 % |

| Permanent Supportive Housing*: Fundamental Components in CoC System – Housing Inventory Chart | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Provider Name | Facility Name | HMIS Part. Code | Number of Year-Round Beds in HMIS | | Geo Code ☐ | Target Population | | Year-Round | | | Total Year-Round Beds |
| | | | Ind. | Fam. | | A | B | Family Units | Family Beds | Individual/ CH Beds | |
| **Current Inventory** | | | | | | | | | | | |
| District 7 Billings Public Housing Authority | PHA S+C * Program | PA | 13 | 0 | 309111 | SMF | | 0 | 0 | 15/1 | 15 |
| District 7 Yellowstone AIDS Council | Tri-State Help, HOPWA | PA | 24 | 18 | 309111 | M | HIV | 9 | 18 | 26/0 | 44 |
| District 7 Yellowstone AIDS Council | Tri-State PLUS, HOPWA | PA | 11 | 8 | 309111 | M | HIV | 4 | 8 | 11/2 | 19 |
| District 8 Helena Public Housing Authority | Helena S+C Program * | N | 0 | 0 | 309049 | SMF | | 0 | 0 | 28/2 | 28 |
| District 11 Missoula Public Housing Authority | Missoula Public Housing Authority S+C Program * | PS | 6 | 0 | 309063 | M | | 16 | 41 | 78/43 | 119 |
| District 11 Missoula Public Housing Authority | Uptown Apartments, SRO * | PS | 1 | 0 | 309063 | M | | 0 | 0 | 14/1 | 14 |
| District 11 Missoula AIDS Council | Tris-State Help, HOPWA | PA | 6 | 5 | 309063 | M | HIV | 5 | 12 | 3/0 | 15 |
| District 11 Missoula AIDS Council | Tri-State Help PLUS, HOPWA | PA | 18 | 1 | 309063 | M | HIV | 1 | 2 | 18/11 | 20 |
| District 12 Public Housing Authority of Butte | S+C Permanent Supportive Housing * | PS | 1 | 0 | 309093 | M | | 2 | 6 | 19/0 | 25 |
| **SUBTOTALS:** | | | 80 | 32 | **SUBTOT. CURRENT INVENTORY:** | | | 37 | 87 | 155/60 | 299 |

| New Inventory in Place in 2006 (Feb. 1, 2006 – Jan. 31, 2007) | | Ind. | Fam. | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| Mt. Department of Commerce | Housing Division* | N | 0 | 0 | 309111 | SM | | 0 | 0 | 18/18 | 18 |
| | **SUBTOTALS:** | 0 | 0 | | **SUBTOTAL NEW INVENTORY:** | | | 0 | 0 | 18/18 | 18 |

| Inventory Under Development | | Anticipated Occupancy Date | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| None this year | | | | | | | 0 | 0 | 0 | 0 |
| | | **SUBTOTAL INVENTORY UNDER DEVELOPMENT:** | | | | | 0 | 0 | 0 | 0 |

| Unmet Need | **UNMET NEED TOTALS:** | 32 | 85 | 152 | 237 |
|---|---|---|---|---|---|

| Total Year-Round Beds—Individuals | | Total Year-Round Beds—Families | |
|---|---|---|---|
| 1. Total Year-Round Individual Permanent Housing Beds: | 155 | 6. Total Year-Round Family Permanent Housing Beds: | 87 |
| 2. Number of DV Year-Round Individual PH Beds: | 0 | 7. Number of DV Year-Round Family PH Beds: | 0 |
| 3. Subtotal, non-DV Year-Round Individual PH Beds (Line 1 minus Line 2): | 155 | 8. Subtotal, non-DV Year-Round Family PH Beds (Line 6 minus Line 7): | 87 |
| 4. Total Year-Round Individual PH Beds in HMIS: | 80 | 9. Total Year-Round Family PH Beds in HMIS | 32 |
| 5. HMIS Coverage—Individual PH Beds (Divide Line 4 by Line 3 and multiply by 100. Round to a whole number): | 52 % | 10. HMIS Coverage—Family PH Beds (Divide Line 9 by Line 8 and multiply by 100. Round to a whole number): | 37 % |

18

## J: CoC Housing Inventory Data Sources and Methods Chart

Complete the following charts based on data collection methods and reporting for the Housing Inventory Chart, including Unmet Need determination. The survey must be for a 24-hour point-in-time (PIT) count during the last week of January 2007.

| | |
|---|---|
| **(1) Indicate date on which Housing Inventory count was completed:   1/31/07  .** | |

| | |
|---|---|
| **(2) Identify the method used to complete the Housing Inventory Chart (check one):** | |
| ☒ | **Housing inventory survey** – CoC conducted a housing inventory survey (via mail, fax, e-mail, web-based, phone or on-site) of homeless programs/providers to update current bed inventories, target populations for programs, beds under development, etc. |
| ☐ | **HMIS** – Used HMIS data to complete the Housing Inventory Chart |
| ☐ | **HMIS plus housing inventory** – Used HMIS data supplemented by a survey of providers NOT participating in the HMIS |

| | |
|---|---|
| **(3) Indicate the percentage of providers completing the housing inventory survey:** | |
| **76 %** | Emergency shelter providers |
| **80 %** | Transitional housing providers |
| **100 %** | Permanent supportive housing providers |

| | |
|---|---|
| **(4) Indicate steps to ensure data accuracy for 2007 Housing Inventory Chart (check all that apply):** | |
| ☒ | **Instructions** – Provided written instructions for completing the housing inventory survey. |
| ☒ | **Training** – Trained providers on completing the housing inventory survey. |
| ☒ | **Updated prior housing inventory information** – Providers submitted updated 2006 housing inventory to reflect 2007 inventory. |
| ☒ | **Follow-up** – CoC followed-up with providers to ensure the maximum possible response rate and accuracy of the housing inventory survey. |
| ☒ | **Confirmation** – Providers or other independent entity reviewed and confirmed information in 2007 Housing Inventory Chart after it was completed. |
| ☐ | **HMIS** – Compared HMIS and housing inventory survey data to check for consistency. |
| ☐ | **Other** – specify: |

| | |
|---|---|
| **Unmet Need:** | |
| **(5) Indicate type of data that was used to determine unmet need (check all that apply):** | |
| ☒ | **Sheltered count** (point-in-time) |
| ☒ | **Unsheltered count** (point-in-time) |
| ☒ | **Housing inventory** (number of beds available) |
| ☐ | **Local studies or data sources** – specify: |
| ☐ | **National studies or data sources** – specify: |
| ☒ | **Provider opinion through discussions or survey forms** |
| ☐ | **Other –** specify: |

| | |
|---|---|
| **(6a) Indicate the method(s) used to calculate or determine unmet need (check all that apply):** | |
| ☐ | **Stakeholder discussion** – CoC stakeholders met and reviewed data to determine CoC's unmet need |
| ☐ | **Locally-determined formula** – Used locally-determined formula based on local point-in-time (PIT) count data and housing inventory to calculate unmet need |
| ☐ | **Applied statistics** – Used local PIT enumeration data and applied national or other local statistics |
| ☒ | **HUD unmet need formula** – Used HUD's unmet need formula* |
| ☐ | **Other** – specify: |

| | |
|---|---|
| **(6b) If more than one method was used in 6a, please describe how these methods were used.** | |
| | |

# CoC Homeless Population and Subpopulations

## K: CoC Point-in-Time Homeless Population and Subpopulations Chart

Indicate date of last point-in-time count:     01/31/07

| Indicate date of last point-in-time count: | (mm/dd/yyyy) | | | |
|---|---|---|---|---|
| **Part 1:  Homeless Population** | **Sheltered** | | **Unsheltered** | **Total** |
| | **Emergency** | **Transitional** | | |
| 1. Number of Households **with** Dependent Children: | 75 | 75 | 16 | 166 |
| 1a. Total Number of Persons in these Households (adults and children) | 232 | 225 | 60 | 517 |
| 2. Number of Households **without** Dependent Children** | 246 | 114 | 205 | 565 |
| 2a. Total Number of Persons  in these Households | 270 | 128 | 235 | 633 |
| **Total Persons (Add Lines 1a and 2a):** | 502 | 353 | 295 | 1150 |
| **Part 2: Homeless Subpopulations** below) | **Sheltered** | | **Unsheltered** | **Total** |
| a.    Chronically Homeless | 35 | | 48 | 83 |
| b.    Severely Mentally Ill | 107 | | 39 | 146 |
| c.    Chronic Substance Abuse | 84 | | 29 | 113 |
| d.    Veterans | 83 | | 60 | 143 |
| e.    Persons with HIV/AIDS | 12 | | * | 12 |
| f.    Victims of Domestic Violence | 162 | | 26 | 188 |
| g.    Unaccompanied Youth (Under 18) | 43 | | 12 | 55 |

## L: CoC Homeless Population and Subpopulations Data Sources & Methods Chart

**L-1: <u>Sheltered Homeless Population and Subpopulations</u>**

| |
|---|
| **(1a) Check method(s) used to count sheltered homeless persons in the CoC (check all that apply):** |
| ☒     **Survey** – Providers count the total number of clients residing in their programs during the PIT count. |
| ☐     **HMIS** – CoC used HMIS to complete the PIT sheltered count and subpopulation information. |
| ☐     **Other** – specify: |
| **(1b) If multiple methods are checked, briefly describe how data collected using the methods were combined to produce the count.** |
| |
| **(2a) Check the method(s) used to gather the subpopulation information on sheltered homeless persons reported in Part 2: Homeless Subpopulations (check all that apply):** |
| ☒     **Point-in-time (PIT) interviews with each adult and unaccompanied youth** – All sheltered adults and unaccompanied youth were interviewed to gather subpopulation information. |
| ☐     **Sample of PIT interviews <u>plus</u> extrapolation** – A sample of sheltered adults and unaccompanied youth were interviewed to gather subpopulation information, and extrapolation techniques were applied to produce the total sheltered homeless population. |
| ☐     **Non-HMIS client-level information -** Providers used individual client records (e.g., case management files) to provide subpopulation data for each adult and unaccompanied youth. |
| ☐     **Provider expertise** – Providers estimated the percentage of clients belonging to each subpopulation based on their knowledge of their client population as a whole. |
| ☐     **HMIS** – CoC used HMIS to gather subpopulation information on sheltered homeless persons. |
| ☐     **Other** –specify: |
| **(2b) If multiple methods are checked, briefly describe how the methods were combined to produce the subpopulation information.** |
| |
| **(3)   Indicate CoC's steps to ensure data quality of the sheltered count (check all that apply):** |
| ☒     **Instructions** – Provided written instructions to providers for completing the sheltered PIT count. |
| ☒     **Training** – Trained providers on completing the sheltered PIT count. |
| ☒     **Remind and Follow-up** – Reminded providers about the count and followed up with providers to ensure the maximum possible response rate and accuracy. |
| ☐     **HMIS** – Used HMIS to verify data collected from providers for the sheltered PIT count. |
| ☐     **Other** –specify: |
| **(4) How often will sheltered counts of sheltered homeless people take place in the future?** |
| ☐     **Biennial (every two years)** |
| ☒     **Annual** |
| ☐     **Semi-annual** |
| ☐     **Other –** specify: |
| **(5) Month and Year when next count of sheltered homeless persons will occur: ___1/31/08___** |
| **(6) Indicate the percentage of providers providing populations and subpopulations data collected via survey, interview and/or HMIS:** |
| __**92**___ %       Emergency shelter providers |
| __**93**___ %       Transitional housing providers |

**L-2: Unsheltered Homeless Population and Subpopulations\***

| | |
|---|---|
| **(1) Check the CoC's method(s) used to count unsheltered homeless persons** (check all that apply): ||
| ☐ | **Public places count** – CoC conducted a point-in-time (PIT) count <u>without</u> client interviews. |
| ☒ | **Public places count with interviews** – CoC conducted a PIT count and interviewed unsheltered homeless persons encountered during the public places count:<br>☒ ALL persons were interviewed   **OR**   ☐ Sample of persons were interviewed |
| ☐ | **Public places count using probability sampling** – High and low probabilities assigned to designated geographic areas based on the number of homeless people expected to be found in each area.  The CoC selected a statistically valid sample of each type of area to include in the point-in-time count and extrapolated results to estimate the entire homeless population. |
| ☒ | **Service-based count** – Interviewed people using non-shelter services, such as soup kitchens and drop-in centers, and counted those that self-identified as unsheltered homeless persons. |
| ☐ | **HMIS** – Used HMIS for the count of unsheltered homeless people homeless people or for subpopulation information. |
| ☐ | **Other** – specify: |
| **(2) Indicate the level of coverage of the PIT count of unsheltered homeless people:** ||
| ☐ | **Complete coverage** – The CoC counted every block of the jurisdiction. |
| ☐ | **Known locations** – The CoC counted in areas where unsheltered homeless people are known to congregate or live. |
| ☒ | **Combination** – CoC combined complete coverage with known locations by conducting counts for every block <u>in a portion of the jurisdiction</u> (e.g. central city) AND conducting counts in other portions of the jurisdiction where unsheltered persons are known to live. |
| ☐ | **Used service-based or probability sampling** (coverage is not applicable) |
| ☐ | **Other** –specify: |
| **(3) Indicate community partners involved in PIT unsheltered count** (check all that apply): ||
| ☒ | **Outreach teams** |
| ☐ | **Law Enforcement** |
| ☒ | **Service Providers** |
| ☒ | **Community volunteers** |
| ☒ | **Homeless and/or formerly homeless persons** |
| ☐ | **Other** – specify: |
| **(4) Indicate CoC's steps to ensure data quality of the unsheltered count** (check all that apply): ||
| ☒ | **Training –** Conducted training(s) for PIT enumerators. |
| ☐ | **HMIS –** Used HMIS to check for duplicate information. |
| ☐ | **Other –** specify: |
| **(5) How often will CoC conduct PIT counts of unsheltered homeless people in the future?** ||
| ☐ | **Biennial (every two years)** |
| ☒ | **Annual** |
| ☐ | **Semi-annual** |
| ☐ | **Quarterly** |
| ☐ | **Other –** specify: |
| **(6) Month and Year when next PIT count of unsheltered homeless persons will occur:**<br>                                              **1/31/08** ||

# CoC Homeless Management Information System (HMIS)

## M: CoC HMIS Charts

### M-1: HMIS Lead Organization Information

| | |
|---|---|
| Organization Name:  MT Dept of Health & Human Srvcs | Contact Person:  Kane Quenemoen |
| Phone: 406-447-4267 | Email:  kquenemoen@mt.gov |
| Organization Type:  State/local government ☒     Non-profit/homeless provider ☐     Other ☐ | |

### M-2: List HUD-defined CoC Name(s) and Number(s) for *every* CoC in HMIS Implementation:

| HUD-Defined CoC Name* | CoC # | HUD-Defined CoC Name* | CoC # |
|---|---|---|---|
| Montana Statewide CoC | MT-500 | | |

### M-3: HMIS Implementation Status

| HMIS Data Entry Start Date for your CoC **OR** Anticipated Date Entry Start Date for your CoC<br><br>May, 2005 | **If no data entry date, indicate reason:**<br>☐ New CoC in 2007<br>☐ Still in planning/software selection process<br>☐ Initial implementation |
|---|---|

### M-4: CoC Client Records

| Calendar Year | Number of Client Records Entered in HMIS / Analytical Database  (Duplicated) for **CoC** | Number of Unduplicated Clients Entered in HMIS / Analytical Database for **CoC** |
|---|---|---|
| 2004 | 5 | 5 |
| 2005 | 66 | 63 |
| 2006 | 356 | 346 |
| **Please provide a brief explanation of the reason(s) for any decreases in the number of records (duplicated or unduplicated) from year to year.**      No decrease experienced | | |

### M-5: Data Collection/Completeness and Coverage

**(a)** Indicate the percentage of unduplicated client records with null or missing values on the date that the point-in-time count was conducted.

| Universal Data Element | % Null/Missing Values | Universal Data Element | % Null/Missing Values |
|---|---|---|---|
| Name | **0 %** | Gender | **0 %** |
| Social Security Number | **0 %** | Veteran Status | **0 %** |
| Date of Birth | **0 %** | Disabling Condition | **0 %** |
| Ethnicity | **0 %** | Residence Prior to Program Entry | **0 %** |
| Race | **0 %** | Zip Code of Last Permanent Address | **0 %** |

**Briefly describe how the CoC ensures that valid program entry and exit dates are being recorded in the HMIS for persons served.**

Valid entry and exit dates are being and will be ensured through the following:
1.  Training and Monitoring

    Timely data entry, especially entry and exit information, are emphasized in all trainings (at least 8 per year).

2. APR Report Reviews
   Beginning this summer, quarterly APR reports will be reviewed by both the local agencies as well as the HMIS management team (Dept of Health & Human Services and the CoC Coalition). The number of client entries and exits are matched against the number of beds in their inventory to ensure reasonable correspondence. Disparities are reported to the Coalition which makes the results available to both the Renewal Review Committee and the Data Review Committee.

3. Management Reports
   Northrup Grumman (system administrator) will complete, this summer, the capacity to produce several kinds of management reports that will enable the HMIS management team to verify data integrity. For example, data entries in specific fields that fall outside of acceptable date ranges will be identified.

4. Spots Checks
   The Data Review Committee will study the effectiveness of the above efforts and, if needed, will consider additional Coalition-led measures to help ensure timely and complete entry and exit dates. One possible measure is to require participants (at least CoC grantees) to run quarterly samplings of a dozen random files for entry and exit dates and cross checking them with actual current client status. The results would be reviewed by the Data Review Committee. This decision and details on how a sampling might be conducted will be on the agenda of a Data Review Committee meeting this summer.

**(b)** Indicate current OR anticipated HMIS bed coverage of 75% for each housing type.

| | 75% bed coverage | Anticipate 75% bed coverage | Date anticipate achieving |
|---|---|---|---|
| Emergency Shelter | N | N | Based upon current information, we do not anticipate achieving 75% participation in E.S. |
| Transitional Housing | N | Y | Sept 1, 2008 |
| Permanent Supportive Housing | N | Y | Sept 1, 2007 |

**(c) If CoC has not yet achieved or does not anticipate achieving 75% bed coverage for all beds (including DV beds), please explain why.**

Emergency Shelter

 Two groups of shelters accounting for 66% of all ES beds have both indicated clear intent NOT to use or participate in the HMIS. These are DVSs (which account for 26% of all beds and 26% of all shelters) and 3 faith-based shelters (which account for 40% of all beds).

The reasons for DVS nonparticipation are well known, but the reasons for the three faith-based shelters are more involved and include: 1) they cannot afford the cost and time required to complete the trainings, do the data entry and commit the time involved in trouble shooting etc., 2) they already have their own systems in place that collect information they need and want, 3) they have concerns about participating in a government program that is onerous and requires commitments that open them to liability, e.g. confidentiality requirements and other agreements.

One of our initiatives this past year was to explore the opportunity and identify the necessary work elements and costs involved in building a bridge to extract the data from the Great Falls Rescue Mission (GFRM) as a pilot project. The GFRM agreed to work with Northrup Grumman and the MT Dept. of Health and Human Services but our HMIS budget ran short and we could not afford the cost of writing the necessary conversion files. It will, however, be pursued further this coming year.

Delays in Achieving Target Dates for TH and PSH
A couple of unexpected technical issues prevented us from achieving full participation rates this past year with all McKinney-Vento grantees. First, the system was not yet able to produce reports that the HMIS Management Team needed to monitor the progress and participation of the agencies. Second, while every agency had been trained and certified, there were a variety of small technical problems that prevented them from fully entering data, including problems with passwords and system denial errors. Those have now all been worked out.

However, even with all McKinney Vento TH grantees participating at 100%, we will still only achieve a 57% coverage rate. Our plan to achieve 79% TH participation now is dependent upon two things: 1) Successfully building a "data bridge" to the Great Falls Rescue Mission and, 2) Either convincing ten RHY grantees to do duplicate data entry (into both U.S. Dept of Health and Human Services' RHYMIS data bank and HUD's HMIS system) or building a separate data bridge to this data. Since RHY is a national program, we will be asking HUD and HHS to help solve this problem. We hope to achieve this by September 1, 2008.

For PSH, we anticipate achieving 100% participation by September 1st, 2007.

**M-6: Training, Data Quality and Implementation of HMIS Data & Technical Standards**

| | Y | N | P |
|---|---|---|---|
| **1. Training Provided:** | | | |
| Basic computer training | | X | |
| HMIS software training | X | | |
| Privacy / Ethics training | X | | |
| Security Training | X | | |
| System Administrator training | X | | |
| **2. CoC Process/Role:** | | | |
| Is the CoC able to aggregate all data to a central location at least annually? | X | | |
| Does the CoC monitor compliance with HMIS Data & Technical Standards Final Notice? | X | | |
| **3. Security—Participating agencies have:** | | | |
| Unique username and password access? | X | | |
| Secure location? | X | | |
| Locking screen savers? | X | | |
| Virus protection with auto update? | X | | |
| Individual or network firewalls? | X | | |
| Restrictions on access to HMIS via public forums (e.g. PKI digital certificates or IP filtering)? | X | | |
| **4. Security—Agency responsible for centralized HMIS data collection and storage has:** | | | |
| Procedures for off-site storage of HMIS data? | | X | |
| Disaster recovery plan that has been tested? | | **X** | |

| 5.  **Privacy Requirements:** | | | |
|---|---|---|---|
| If your state has additional confidentiality provisions, have they been implemented? <br> ☐ Check here if there are no additional state confidentiality provisions. | X | | |
| Is there a "Purpose for data collection" sign at each intake desk for all participating agencies? | X | | |
| Has each participating agency adopted a written privacy policy, including the uses and disclosures of client information? | X | | |
| Does each participating agency have a privacy policy posted on its website (if applicable)? | X | | |
| 6.  **Data Quality—CoC has process to review and improve:** | | | |
| Client level data quality (i.e. missing birth dates etc.)? | X | | |
| Program level data quality (i.e. data not entered by agency in over 14 days)? | | | X |
| CoC bed coverage (i.e. percent of beds)? | | | X |
| 7.  **Unduplication of Client Records—the CoC:** | | | |
| Uses only HMIS data to generate unduplicated count? | X | | |
| Uses data integration or data warehouse to generate unduplicated count? | | | X |
| 8.  *OPTIONAL:*  **Uses of HMIS Data—CoC uses HMIS data for:** | | | |
| Point-in-Time Count | | | X |
| Project/Program performance monitoring | | | X |
| Program purposes (e.g. case management, bed management, program eligibility screening) | X | | |
| Statewide data aggregation (e.g. data warehouse) | X | | |

# Part III: CoC Strategic Planning

**N: CoC 10-Year Plan, Objectives, and Action Steps Chart**

.

## N: CoC 10-Year Plan, Objectives, and Action Steps Chart

| Objectives to End Chronic Homelessness _and_ Move Families and Individuals to Permanent Housing | 2007 Local Action Steps<br><br>How are you going to do it? List action steps to be completed within the next 12 months. | Lead Person<br><br>List name and title or organization of one person responsible for accomplishing each action step. | Baseline (Current Level) | Numeric Achievement in 12 months | Numeric Achievement in 5 years | Numeric Achievement in 10 years |
|---|---|---|---|---|---|---|
| 1. Create new PH beds for chronically homeless persons. | 1. Secure and implement Samaritan Bonus Project grant award for 5 S+C CH vouchers in Missoula, MT | Peter Hance, E.D., Missoula PHA | 60 Beds<br><br>"16 available for occupancy" on 3/31/07 | 70 Beds | 140 Beds | 235 Beds |
| | 2. Request the newly reappointed MT Council on Homelessness (MCoH) to adopt 50 state-funded vouchers as a priority Action Item (for inclusion in next Executive Budget and support passage in 2009 Legislature). | Bob Buzzas, MT CoC coordinator and member of MT Council on Homelessness (MCoH) | | | | |
| | 3. Recruit eligible provider to apply for at least 5 more SPC CH vouchers or SHP/PH beds in 2008 CoC Competition (and each year after that). | Revonda Stordahl, Butte Public Housing Authority | | | | |
| | 4. Convert 5 existing SPC vouchers to CH dedicated vouchers. | BobBuzzas, MT CoC coordinator | | | | |
| 2. Increase percentage of homeless persons staying in PH over 6 months to at least 71%. | 1. Monitor APRs in September and January to track retention rates & report to membership. | Jane Guest, Salvation Army | 85% | 85% | 85% | 85% |
| | 2. Schedule PH Best Practices review session at annual planning retreat in September. | Jim McGrath, Missoula PHA | | | | |
| | 3. Formally request MCoH to adopt increase in state mental health case management and support services to seriously disabled persons living in supportive housing as a priority action item. | Bob Buzzas MT CoC | | | | |
| | 4. MCoH Chair present award at annual planning retreat to PHAs recognizing and celebrating their achievement (78% in '06 and 85% in '07) | Jim Nolan, MT Dept of Health & Human Srvcs | | | | |
| 3. Increase percentage of homeless persons moving from TH to PH to at least 61.5%. | 1. Conduct TH to PH Best Practices workshop at the annual planning retreat in September. | Melissa Gordon, MissoulaOffice of Planning & Grants | 64 % | 65% | 70% | 80% |
| | 2. Request all SHP grantees complete a plan for ensuring continued rate of movement into PH. | Cindy Weese, YWCA | | | | |

| | | | % Bed Cover-age | % Bed Cover-age | % Bed Cover-age | % Bed Cover-age |
|---|---|---|---|---|---|---|
| | 3. Review CoC scoring of this criterion in the ranking process and consider increasing number of points and importance. | Chris Krager, Samaritan House | | | | |
| 4. Increase percentage of homeless persons employed at exit to at least 18%. | 1. Conduct Employment Best Practices session at annual planning retreat with all SHP, SPC and other nongrantee participants. | Theresa McCarthy, Homeward Bound | 41 % | 45% | 50% | 65% |
| | 2. Recruit WIA and WoRC (Work Readiness Component) leaders to participate in local and state CoC meetings and participate in Best Practices session at annual retreat. | Bob Buzzas, MT CoC | | | | |
| | 3. Work with Billings Homeless Board to share lessons learned from sponsoring Pathways visit and workshop in Billings. | Sheri Boelter, Dist 7 HRDC | | | | |
| 5. Ensure that the CoC has a functional HMIS system. | 1. Set Sept 1 deadline for all CoC grantees to be fully entering data for all clients. Any project not fully entering by then will be referred Renewal Project Review Committee to be put on "Deficient Status" until fully participating. | Gypsy Ray, Mountain Home | % Bed Cover-age | % Bed Cover-age | % Bed Cover-age | % Bed Cover-age |
| | 2. Conduct trainings in July and August in Helena and Missoula to ensure anyone needing refresher training is ready to fully participate by Sept 1. | Kane Quenemoen, MT DPHHS | ES- 12% | ES-36% | ES-75% | ES-75% |
| | 3. Work with MT DPHHS to ensure system manager rolls out management reports in July and August. | Bob Buzzas, MT CoC | TH -18% | TH-79% | TH-80% | TH-80% |
| | 4. Conduct HMIS Workshop at Sept Planning Retreat to showcase how HMIS data can be useful in planning, APRs, and fundraising in order to promote better understanding of HMIS usefulness. | Lil Dupree, NW MT Human Resources | PH - 43% | PH-100% | PH-100% | PH-100% |
| | 5. Resume "data bridge" building pilot project with Great Falls Rescue Mission and use results to survey other providers to determine other data bridge opportunities and barriers. | Kane Quenemoen, MT DPHHS | | | | |

**Barriers: If your CoC will not meet one or more of the above objectives, briefly describe why not (use less than two paragraphs).**

As indicated in M.5.c, at this time we cannot anticipate HMIS being fully functioning with Emergency Shelters given that two groups of shelters accounting for 66% of all ES beds have both indicated clear intent NOT to participate in HMIS. These are domestic violence shelters (which account for 26% of all beds and 42% of all shelters) and 3 faith-based shelters which account for 40% of all beds).

We also face a significant challenge to achieving 75% TH participation but have a new plan we believe has a reasonable chance of success. Both ES and TH success, however, will depend on finding ways to affordably build "data bridges." HMIS Action Step #5 is a critical step to determining whether "data bridges" will be an affordable solution by incorporating providers' data without their active participation in HMIS.

## O: CoC Discharge Planning Policy Chart

| Publicly Funded Institution(s) or System(s) of Care in CoC Geographic Area | None | Initial Discussion | Protocol in Development | Formal Protocol Finalized | Formal Protocol Implemented |
|---|---|---|---|---|---|
| Foster Care | ☐ | ☐ | ☐ | ☐ | ☒ |
| Health Care | ☒ | ☐ | ☐ | ☐ | ☐ |
| Mental Health | ☐ | ☐ | ☐ | ☐ | ☒ |
| Corrections | ☐ | ☐ | ☐ | ☐ | ☒ |

**Foster Care:**

The Foster Care Independence Program currently includes developing a Life Plan Assessment within 30 days of turning 16. The CoC Protocols added measures that will ensure identification of youth aging out of the system with no place to live or resources to obtain housing. In addition to providing a better referral list for other community service providers who can help to find housing, this information will be provided to the Coalition for preparation of an annual report.

The Coalition will also provide the FCIP with a community resources list and contacts, including housing programs such as Runaway and Homeless Youth, Transitional Housing programs and even Permanent Supportive Housing Programs.

Both organizations also agree to explore options for sharing data or merging their management information systems to provide better information about the extent to which youth age out of the foster care system into homelessness.

Programs and housing that are being used for discharge include the Runaway and Homeless Youth Transitional Housing program operated by the 10 HRDCs (Community Action Agencies) across the state, the Section 8 Housing programs and youth group homes in Missoula, Bozeman and Helena.

Protocol For Preventing Discharge into Homelessness signed by Robert Buzzas, MT CoC on May 12, 2006 and signed by Heather Winters, Director, MT Foster Care Independence program on May 25, 2006.

**Health Care:**

No protocol developed. As a "statewide" continuum of care, we are in the early stages of trying to build relationships with 10 hospitals in the state's 7 major cities or towns and to devise local cooperative agreements to prevent discharge into homeless.

**Mental Health:**
The Protocol implements the following measures:

- Each patient admitted to the Hospital will have an Initial Discharge Plan developed no later than 10 days following the patient's admission. The Plan will focus on individual needs of the patient, will include family members, and related community agencies as appropriate and will identify a community mental health contact person and State Hospital coordinator.

- Every effort is made to involve the community mental health contact person in the discharge plan review process.

- Patients due to be discharged without a place to go or the resources to obtain housing will be identified along with relevant circumstances, e.g. patient declined assistance, chose to be discharged without a place to live and community destination. This information will be shared with the Coalition at least once annually.

- Patients identified as being discharged without a place to go or the resources to obtain housing will receive counseling that includes reviewing options, referral to community assistance resources and assistance making contact with those resources.

- The Coalition will provide an annually updated list of community resources and contacts, including transitional housing programs and Permanent Supportive Housing programs.

- The Coalition will collaborate with DPHHSs Senior and Long Term Care Regional and Community Program Officers in an effort to identify, coordinate and utilize all available community resources.

- The Coalition and the State Hospital agree to explore options and discuss ways that their respective management information systems (both within the DPHHS) might share or merge data that will better inform our understanding of homelessness among discharged patients in Montana.

Programs and housing that are being used for discharge include halfway houses in several cities, Section 8 Housing, AWARE Inc. (housing for disabled), and, occasionally, emergency shelters in Billings, Butte and Missoula where temporary shelter is necessary while waiting for other assistance.

Protocol signed by Robert Buzzas, MT CoC Coalition on April 6, 2006 and agreed to by the Director of the Montana State Hospital on May 24th .

**Corrections:**

The protocol provides for the following measures:

- Offenders due to be discharged within 30 days will be identified.

- Each of these offenders will be surveyed to determine their plans, if any, upon discharge.

- An institutional parole officer will review each individual's plan and identify any offender who does not have a place to go or the resources to obtain housing.

- Eligible offenders will be referred to the Department of Corrections Transitional Living Program. Eligibility criteria include having an approved residence and demonstrated financial capability to pay living and programs costs.

- Offenders identified as being discharged without a place to go or the resources to obtain housing will receive counseling that includes reviewing options, referral to community assistance resources and assistance making contact with those resources.

- The Coalition will provide an annually updated list of community resources and contacts, including transitional housing programs and Permanent Supportive Housing programs.

- The Coalition will collaborate with DPHHSs Senior and Long Term Care Specialist in Butte to identify additional community resources for discharged offenders and participate, when appropriate, in meetings with the parole officers at the State Prison.

- A list will be kept of Deer Lodge Prison offenders being discharged without housing or the resources to obtain housing that either decline assistance or are being discharged under parole/probation. This list will include:
  - Name
  - Circumstances (i.e. declined assistance, were free of any further supervision, were discharged on parole, etc.)
  - Community destination

- The Department of Corrections will explore also collecting the same information for discharges from all of its facilities.

- The Coalition and the Department agree to examine their respective management information systems for possible sharing or merging of data that will better inform our understanding of homelessness among discharged offenders in Montana.

Programs and housing being used for discharge include halfway houses in 5 communities including a TEAM Mentoring halfway house in Belgrade. Emergency shelters are also used when no other options exist.

Protocol signed by Robert Buzzas, MT CoC Coalition on May 12, 2006 and signed by Mike Ferriter, MT Dept of Corrections, on May 24, 2006.

## P: CoC Coordination Chart

| 1. Consolidated Plan Coordination | YES | NO |
|---|:---:|:---:|
| a. Do Con Plan planners, authors and other Con Plan stakeholders participate in CoC general planning meetings? | ☒ | ☐ |
| b. Do CoC members participate in Con Plan planning meetings, focus groups, or public forums? | ☒ | ☐ |
| c. Were CoC strategic plan goals addressing homelessness and chronic homelessness used in the development of the Con Plan? | ☒ | ☐ |
| **2. Jurisdictional 10-year Plan Coordination** | | |
| a. Is there one or more formal jurisdictional 10-year Plan(s) being developed and/or being implemented within your CoC geography that are separate from the CoC 10-year plan? (If No, you may skip to Question 3a.) | ☒ | ☐ |
| b. Do 10-year Plan conveners, authors and other stakeholders participate in CoC general planning meetings? | ☒ | ☐ |
| c. Have 10-year Plan participants taken steps to align their planning process with the local CoC plan? | ☒ | ☐ |
| d. Were CoC strategic plan goals used in the development of the 10-year Plan(s)? | ☒ | ☐ |
| e. Provide the number of jurisdictions within your CoC geography that have formally implemented a 10-year plan(s). <br><br> A Statewide plan was completed by the MT Council on Homelessness (but not yet formally adopted) and the state's largest city, Billings, with the largest homeless population is close to finishing their 10 Yr. Plan. <br><br> A Statewide 10 Yr Plan was not officially adopted before the executive order creating the Council expired on May 1, 2006. The Council, however, was re-established by the new Governor on May 1, 2007 and this council will pick up where the last Council left off. <br><br> Missoula gathered a planning group to adopt a 10 Year Plan but instead decided it would be more effective to adopt a short-term 2 year plan. <br><br> Helena and Kalispell are planning to convene local groups to adopt plans this coming year. | | |
| **3. Public Housing Agency Coordination** | | |
| a. Do CoC members meet with CoC area PHAs to improve coordination with and access to mainstream housing resources? | ☒ | ☐ |

# CoC 2007 Funding Priorities

## Q: CoC Project Priorities Chart

| HUD-defined CoC Name: Montana Statewide CoC | | | | | | CoC #: MT-500 | | | |

| (1) SF-424 Applicant Name (Please Remove Examples) | (2) Project Sponsor Name | (3) Project Name | (4) Priority | (5) Requested Project Amount | (6) Term | (7) Program and Component Type SHP New | SHP Renewal | S+C New | SRO New |
|---|---|---|---|---|---|---|---|---|---|
| ☒** Missoula Housing Authority | Missoula Housing Authority | MHA New 5 SPC | 1 | $158,700 | 5 | | | TRA | |
| Samaritan House Inc. | Samaritan House Inc. | Samaritan House Inc. | 2 | $63,000 | 1 | | TH | | |
| Human Resources Council, District XII | Human Resources Council, District XII | Homeward Bound | 3 | $90,958 | 1 | | TH | | |
| Missoula County | YWCA of Missoula | Ada's Place | 4 | $101,001 | 1 | | TH | | |
| Mountain Home Montana Inc. | Mountain Home Montana Inc. | Hamilton Project | 5 | $ 76,798 | 1 | | TH | | |
| Poverello Center, Inc. | Poverello Center, Inc. | Joseph Residence at Maclay Commons | 6 | $ 72,000 | 2 | TH | | | |
| Supporters of Abuse Free Environments (SAFE), Inc. | Supporters of Abuse Free Environments (SAFE), Inc. | SAFE Transitional Housing | 7 | $ 35,700 | | | TH | | |
| District 7 Human Resources Development Council | District 7 Human Resources Development Council | Harmony House Transitional Living Program | 8 | $127,736 | 2 | TH | | | |
| Florence Crittenton Home and Services | Florence Crittenton Home and Services | Pathways to Success | 9 | $124,546 | 1 | | TH | | |
| Missoula County | The Salvation Army | Gateway Center | 10 | $ 61,579 | 1 | | TH | | |
| God's Love, Inc. | God's Love Inc. | Family Transitional Center | 11 | $ 150,470 | 1 | | TH | | |
| Missoula County | Western Montana Mental Health Center-Turning Point | Share House | 12 | $196,665 | 1 | | TH | | |
| State of Montana | MT DPHHS/IHSB | HMIS | 13 | $ 66,980 | 1 | | HMIS | | |
| (8) Subtotal: Requested Amount for CoC Competitive Projects: | | | | $ 1,326,133 | | | | | |
| (9) Shelter Plus Care Renewals: | | | | | | S+C Component Type | | | |
| Housing Authority of Billings | Housing Authority of Billings | HAB Shelter+Care | 14 | $ 83,160 | 1 | SPC/TRA | | | |
| Public Housing Authority of Butte | Public Housing Authority of Butte | Shelter + Care Tenant Based Assistance | 15 | $ 75,960 | 1 | SPC/TRA | | | |
| Helena Housing Authority | Helena Housing Authority | Helena Area Shelter Plus Care | 16 | $ 166,922 | 1 | SPC/TRA | | | |

| Missoula Housing Authority | Missoula Housing Authority | MHA 70 Shelter Plus Care Renewal | 17 | $ 461,040 | 1 | SPC/TRA |
|---|---|---|---|---|---|---|
| **(10) Subtotal: Requested Amount for S+C Renewal Projects:** | | | | **$ 787,082** | | |
| **(11) Total CoC Requested Amount (line 8 + line 10):** | | | | **$ 2,114,215** | | |

<div align="right">CoC-Q</div>

## R: CoC Pro Rata Need (PRN) Reallocation Chart
**(Only for Eligible Hold Harmless CoCs)**

Not Applicable

## S: CoC Project Leveraging Summary Chart

| Name of Continuum | Total Value of Written Commitment |
|---|---|
| Montana Statewide CoC / MT-500 | $ 6,294,303 |

## T: CoC Current Funding and Renewal Projections Chart

## T: CoC Current Funding and Renewal Projections

### Supportive Housing Program (SHP) Projects:

| Type of Housing | All SHP Funds Requested (Current Year) 2007 | Renewal Projections 2008 | 2009 | 2010 | 2011 | 2012 |
|---|---|---|---|---|---|---|
| Transitional Housing (TH) | $ 1,038,874 | 912,374 | 1,012,243 | 1,012,243 | 1,012,243 | 1,012,243 |
| Safe Havens-TH | 0 | 0 | 0 | 0 | 0 | 0 |
| Permanent Housing (PH) | 0 | 0 | 0 | 0 | 0 | 0 |
| Safe Havens-PH | 0 | 0 | 0 | 0 | 0 | 0 |
| SSO | 61,579 | 61,579 | 61,579 | 61,579 | 61,579 | 61,579 |
| HMIS | 66,980 | 66,980 | 66,980 | 66,980 | 66,980 | 66,980 |
| **Totals** | 1,167,433 | 1,040,933 | 1,140,802 | 1,140,802 | 1,140,802 | 1,140,802 |

### Shelter Plus Care (S+C) Projects:

| Number of S+C Bedrooms | All S+C Funds Requested (Current Year) 2007 Units | $ | Renewal Projections 2008 Units | $ | 2009 Units | $ | 2010 Units | $ | 2011 Units | $ | 2012 Units | $ |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| SRO | | | | | | | | | | | | |
| 0 | | | | | | | | | | | | |
| 1 | 115 | 823,836 | 133 | 811,140 | 133 | 811,140 | 133 | 811,140 | 156 | 941,808 | 156 | 941,808 |
| 2 | 15 | 113,340 | 17 | 129,372 | 17 | 129,372 | 17 | 129,372 | 17 | 129,372 | 17 | 129,372 |
| 3 | 1 | 8,676 | 1 | 8,676 | 1 | 8,676 | 1 | 8,676 | 1 | 8,676 | 1 | 8,676 |
| 4 | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | |
| **Totals** | 131 | 945,852 | 151 | 949,188 | 151 | 949,188 | 151 | 949,188 | 179 | 1,079,856 | 179 | 1,079,856 |

# Part IV:  CoC Performance

## U: CoC Achievements Chart

For the five HUD national objectives in the **2006** CoC application, enter the 12-month measurable achievements that you provided in Exhibit 1, Chart N of the **2006 CoC application**.   Under "Accomplishments," enter the *numeric* achievement that your CoC attained within the past 12 months that is *directly related* to the measurable achievement proposed in 2006.  Below, if your CoC did not meet one or more of your proposed achievements, please describe the reasons for this.

| 2006 Objectives to End Chronic Homelessness and Move Families *and* Individuals to Permanent Housing | 12-month Measurable Achievement Proposed in 2006<br><br>(from Chart N of your 2006 CoC application) | Accomplishments<br>(Enter the numeric achievement attained during past 12 months) |
|---|---|---|
| 1. Create new PH beds for chronically homeless persons. | 1.  Expand Billings Public Housing Authority TRA SPC beds by 10<br>2.  Lobby for 48 state-funded vouchers in Governor's Budget and Legislature.<br><br>Increase # of existing S+C beds for CH by 5 Co | 1.  0 - Applied for but was not awarded new vouchers.<br>2.  0- CoC successfully lobbied the MT Council on Homelessness to add 48 vouchers, but Governor did not accept<br>3.  Increased # of S+C beds designated for or occupied by CH by 39. |
| 2. Increase percentage of homeless persons staying in PH over 6 months to 71%. | 1.  Secure 5 state-funded case managers serving CH population in Governor's Budget<br>2.  All SHP projects participate in workshop to identify Best Practices<br>3.  Each PHA adopt action plan to maintain current levels or increase goals<br><br>Goal:  78% *Co* | 1.  0- Successfully lobbied MCoH to include but Governor did not accept.<br>2.  All projects participated.<br>3.  All projects adopted a plan.<br><br>Achieved:  85% retention rate. |
| 3. Increase percentage of homeless persons moving from TH to PH to 61.5%. | 1.  Ensure all TH programs establish practice of immediate enrollment to Sect 8 of all clients.<br>2.  All SHP projects participate in workshop to identify Best Practices.<br>3.  Each SHP adopt action plan to achieve individual goals.<br><br>Goal:  52% *Co* | 1.  All projects refer for immediate enrollment<br>2.  64% (7 of 11)  projects participated.<br>3.  All projects adopted plan.<br><br>Achieved:  64% rate to PH. |
| 4. Increase percentage of homeless persons becoming employed by 11%. | 1.  Workforce Program and CoC Projects Planning Session to i.d. actions and best practices for achieving employment goals.<br>2.  All SHP projects adopt individual action plans to achieve 11% increase in employment success rates.<br><br>Goal:  57% *Co* | 1.  Planning session cancelled; Governor disbanded and reorganized Workforce program.<br>2.  All projects adopted plan.<br><br>Achieved:  41% employment. |

| 5. Ensure that the CoC has a functional HMIS system. | 1. Identify costs, barriers and solutions to developing bridge or interfaces to integrate data from providers not willing to use the HMIS.<br>2. Implement 2 Pilot Projects using an E.S. and an Outreach provider to test and demonstrate accessing data from other data management systems.<br>3. Implement Round 3 Recruitment of Non-McKinney Vento providers in the outreach and ES areas using both interface retrieval methods and HMIS financial incentives.<br>4. MT CoC Data Committee review 05-06 progress and identify priorities for 06-07.<br><br>Goals:<br>a. 40% of outreach clients entered<br>b. 20% of ES beds entered<br>c. 63% of Th beds entered<br>d. 100% of PSH beds entered | 1. Budget ran out of money before all information could be gathered.<br>2. Implemented both projects and both projects decided to participate directly in HMIS rather than try "bridges."<br>3. Outreach and contacts made to 17 providers but none agree to participate.<br>4. Committee prioritized effort to pursue new "data bridge" pilot project w/ next round of grant funding.<br><br>Actual<br>a. 0<br>b. 12%<br>c. 18%<br>d. 43% |

**Briefly explain the reasons for not meeting one or more of your proposed measurable achievements.**

Chronic Homeless Beds

While we were able to increase the number of beds "designate for or occupied by" CH to 39 by using existing SPC beds, we were not successful in getting the State to fund 50 new vouchers. We were successful in getting the MT Council on Homelessness to adopt this, but it was not accepted by the Governor for inclusion in the Executive Budget (which is proposed to the Legislature). We believe that we simply did not lobby hard enough, but also understand the Governor and his staff have not been educated sufficiently nor were they involved in the development of the proposal. We will try again for state funding in the 2008 Executive Budget in anticipation of the 2009 Legislature.

Employment

Even though we surpassed the HUD objective of 18% and achieved a rate of 41% employment, we did not reach our 57% goal and now believe this might have been overly ambitious. Nonetheless, we will continue to aim for increases in the future.

HMIS Goals

We did not achieved our goals for TH and PSH largely due to unanticipated technical problems in our system which prevented some trained and certified agencies from entering data and did not provide management reports needed to monitor usage. All of these issues have now been resolved.

ES still presents a huge challenge due to the fact that <u>66%</u> of all ES beds have indicated clear intent NOT to use or participate in the HMIS. These are DVSs (which account for 26% of all beds and 26% of all shelters) and 3 faith-based shelters (which account for 40% of all beds). In addition, another 12% of the beds are part of very small, volunteer-based organizations who indicate that they do not have the time or resources necessary to go through the training and allocate the time it takes to enter HMIS data. Many of these organizations do not even have computers or volunteers who use a computer. Others are also intimidated by the legal commitments and signed agreements.

*OPTIONAL:* **If desired, you may use this space to describe your CoC's most significant accomplishments over the past 12 months.**

Our two most significant successes are:

1.  CoC grantees focused efforts on achieving the HUD objectives and were able to surpass them, especially in keeping PSH clients in for more than 7 months and in increasing employment income.

2.  Second, our initial efforts to learn more about the costs and tasks involved in building data bridges (to access HMIS data from nonparticipating agencies by extracting the data from their data bases) by adopting two pilot projects actually resulted in them participating directly in HMIS. One is an emergency shelter and the other is a state operated homeless outreach program (PATH).

## V: CoC Chronic Homeless (CH) Progress Chart

| **1.** Enter the total number of chronically homeless persons in your CoC and the total number of permanent housing beds designated for the chronically homeless in your CoC for each year. |||
|---|---|---|
| **Year** | **Number of CH Persons** | **Number of PH beds for the CH** |
| **2005** | 234 | 23 |
| **2006** | 158 | 39 |
| **2007** | 83 | 78** |

**Briefly describe the reason(s) for any increases in the total number of chronically homeless persons between 2006 and 2007:**

**As per the instructions (HUD-40090-1 p. xiii), this number reflects numbers given in the Housing Inventory Chart which includes beds *"designated for or occupied by"* individuals who are CH. Therefore, this number is not just "designated" beds as called for in the instructions above.

This number also includes the use of existing SPC beds for CH which are not "new" beds as called for below.

| **2.** Indicate the number of **new** PH beds in place and made available for occupancy for the chronically homeless between February 1, 2006 and January 31, 2007: | 18 |
|---|---|

**3.** Identify the amount of funds from each funding source for the development and operations costs of the **new** CH beds created between February 1, 2006 and January 31, 2007.

| Cost Type | Public/Government | | | | Private |
| | **HUD McKinney-Vento** | **Other Federal** | **State** | **Local** | **Private** |
|---|---|---|---|---|---|
| **Development** | $ | $ | $ 2,450 | $ | $ 2,000 |
| **Operations** | $ 4,384 | $ 4,384 | $ | $ | $ |
| **TOTAL** | $ 4,384 | $ 4,384 | $ 2,450 | $ | $ 2,000 |

## W: CoC Housing Performance Chart

| 1.  Participants in Permanent Housing (PH) | |
|---|---|
| HUD will be assessing the percentage of all participants who remain in S+C or SHP permanent housing (PH) for more than six months.  SHP projects include both SHP-PH and SHP-Safe Haven PH renewals.  Complete the following chart using data based on the <u>most recently submitted </u>APR for Question 12(a) and 12(b) for PH projects included on your CoC Priority Chart: | |
| ☐  No applicable PH renewals are on the CoC Project Priorities Chart | APR Data |
| ☒  <u>All</u> PH renewal projects with APRs submitted are included in calculating the responses below | |
| a.   Number of participants who **exited** PH project(s)—APR Question 12(a) | 46 |
| b.   Number of participants who did **not leave** the project(s)—APR Question 12(b) | 147 |
| c.   Number who **exited** after staying 7 months or longer in PH—APR Question 12(a) | 38 |
| d.   Number who did **not leave** after staying 7 months or longer in PH—APR question 12(b) | 126 |
| e.   Percentage of all participants in PH projects staying 7 months or longer (c. + d. divided by a. + b.,  multiplied by 100 = e.) | 85 % |

| 2.  Participants in Transitional Housing (TH) | |
|---|---|
| HUD will be assessing the percentage of all TH clients who moved to a permanent housing situation. TH projects include SHP-TH and SHP-Safe Haven/TH *not* identified as permanent housing. Complete the following chart using data based on the <u>most recently submitted</u> APR Question 14 for TH renewal projects included on your CoC Priorities Chart. | |
| ☐  No applicable TH renewals are on the CoC Project Priorities Chart | APR Data |
| ☒  <u>All</u> TH renewal projects with APRs submitted are included in calculating the responses below | |
| a.   Number of participants who exited TH project(s)—including unknown destination | 354 |
| b.   Number of participants who moved to PH | 226 |
| c.   Percent of participants in TH projects who moved to PH (b. divided by a., multiplied by 100 = c.) | 64 % |

# X: Mainstream Programs and Employment Project Performance Chart

| ☐ | No applicable renewal projects for the Mainstream Programs and Employment Chart are included in the CoC Priorities Chart. |
|---|---|
| ☐ | All renewal projects on the CoC Priorities Chart that are not exempted from reporting in the APR are included in calculating the responses below. |

| (1) Number of Adults Who Left (Use same number in each cell) | (2) Income Source | (3) Number of Exiting Adults with Each Source of Income | (4) Percent with Income at Exit (Col 3÷Col 1 x 100) |
|---|---|---|---|
| 400 | a.  SSI | 26 | 6.5% |
| 400 | b. SSDI | 35 | 8.8% |
| 400 | c.  Social Security | 3 | .8% |
| 400 | d. General Public Assistance | 1 | .3% |
| 400 | e.  TANF | 23 | 5.8% |
| 400 | f.  SCHIP | 6 | 1.5% |
| 400 | g.  Veterans Benefits | 24 | 6.0% |
| 400 | **h. Employment Income** | 158 | 41.0% |
| 400 | i.  Unemployment Benefits | 13 | 3.3% |
| 400 | j.  Veterans Health Care | 8 | 2.0% |
| 400 | k.  Medicaid | 103 | 25.8% |
| 400 | l.  Food Stamps | 173 | 43.3% |
| 400 | m. Other (please specify) | 32 | 8.0% |
| 400 | n.  No Financial Resources | 59 | 14.8% |

# Y: Enrollment and Participation in Mainstream Programs Chart

| | Check those activities implemented by **a majority** of your CoC's homeless assistance providers (check all that apply): |
|---|---|
| ☒ | A majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream benefit programs. |
| ☒ | The CoC systematically analyzes its projects' APRs to assess and improve access to mainstream programs. |
| ☐ | The CoC has an active planning committee that meets at least three times a year to improve CoC-wide participation in mainstream programs. |
| ☐ | A majority of homeless assistance providers use a single application form for four or more of the above mainstream programs. |
| ☒ | The CoC systematically provides outreach and intake staff specific, ongoing training on how to identify eligibility and program changes for mainstream programs. |
| ☐ | The CoC or any of its projects has specialized staff whose primary responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs. |
| ☒ | A majority of homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments, employment training, or jobs. |
| ☒ | A majority of homeless assistance providers have staff systematically follow-up to ensure that mainstream benefits are received. |
| ☒ | The CoC coordinates with the State Interagency Council(s) on Homelessness to reduce or remove barriers to accessing mainstream services. |

## Z: Unexecuted Grants Awarded Prior to the 2006 CoC Competition Chart

Provide a list of <u>all</u> HUD McKinney-Vento Act awards made prior to the 2005 competition that are not yet under contract (i.e., signed grant agreement or executed ACC).

| Project Number | Applicant Name | Project Name | Grant Amount |
|---|---|---|---|
| None | | | |

## AA: CoC Participation in Energy Star Chart

HUD promotes energy-efficient housing.  All McKinney-Vento funded projects are encouraged to promote energy efficiency, and are specifically encouraged to purchase and use Energy Star labeled products.  For information on the Energy Star initiative go to: http://www.energystar.gov.

Have you notified CoC members of the Energy Star initiative? ☒Yes   ☐ No

Percentage of CoC projects on CoC Priority Chart using Energy Star appliances: __70__%

## AB:  Section 3 Employment Policy Chart

| | YES | NO |
|---|---|---|
| 1.  Is any project in your CoC requesting HUD funds for housing rehabilitation or new construction? | ☐ | ☒ |